

Grade A Producers

Monthly Report Of Producer Sales Or Deliveries To Association, Processor or Distributor

Please return fee and form to:
Kansas Department of Agriculture
RECORDS CENTER - DAIRY
109 SW 9th Street
Topeka KS 66612

Name of Assn _____
or Mfg Plant _____
Address _____
Plant Location _____
Plant Number _____

For Month _____ Year _____ Kansas Dairy License Number _____

Producer's Name	Producer Number	# Of Days	Total Pounds Milk
		Delivered	Sold or Delivered

TOTAL LBS _____ X \$.00015 = \$ _____ TOTAL DUE
(\$0.015/100 LBS)

This report is due in the office of the Dairy Commissioner on or before the end of the month following the preceding calendar month. **For each day after the end of the month, an additional charge equal to 1% of the amount of delinquent fees or \$5.00 whichever amount is greater, shall be assessed.**

For and on behalf of the applicant, I, the undersigned, hereby authorize the Secretary of the Kansas Department of Agriculture or his/her authorized representative to examine all records of the applicant necessary for the purpose of verifying and determining the fee due under the dairy law to the State of Kansas. (K.S.A. 65-702)

I declare that this report, including any accompanying schedule and statement, has been examined by me and to the best of my knowledge and belief is a true, correct and complete report. I also certify that I am authorized to sign this report.

Date _____ Signature _____

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For Office Use Only

_____, _____, _____ Lbs

\$0.00015 \$ _____, _____, _____ DT1 _____
CK # _____